MENTALLY ILL OFFENDER

Program Evaluation Survey

This survey will become part of your county's MIO contract with the Board of Corrections. For purposes of this survey:

- "Program" refers to a defined set of interventions that will be given to a specified research sample in order to evaluate well-stated hypotheses. If you have more than one Program, please fill out a separate survey for each Program.
- "Research Design" refers to the procedures you will use to test the stated hypotheses for your Program. In some instances you will have more than one Research Design for a Program, in which case a separate survey must be completed for each Research Design.
- "Project" refers to all the work that you propose to do with the MIO Grant. For example, if you have two Programs and two Research Designs for each Program, the entire effort would constitute your Project (and you would complete four surveys).

To simplify the task of completing this survey, we refer you to two sources: 1) the initial Research Design Summary Form, and 2) your Program's responses to the technical compliance issues identified during the grant review. If no additional information was requested of a particular item on the Research Design Summary Form, you can enter the original text into the appropriate space below. If more information was requested, provide a more complete response.

1.	County: Orange	
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2. **Program Name:** Current Board of Corrections grant participants have found it useful to pick a name that helps them to create a Program identity (two examples are the "IDEA" Program and the "Home Run" Program). Indicate the title you will be using to refer to your Program.

Response: IMPACT: Non-probationer Program

3. **Treatment Interventions**: Describe the components of the Program that you will be evaluating. Another way of saying this is, "Describe how the 'treatment' offenders (those in the Program) will be treated differently than the comparison offenders (e.g., services while incarcerated, more intensive supervision, more thorough assessment, a wider range of services, more aggressive case management, better aftercare)."

Response: Treatment offenders will receive increased case management from Health Care Agency staff beginning while in custody, the purpose of which is to increase the offenders' use of mental health and drug treatment services, as well as housing services and employment services.

- 4. **Research Design:** Describe the Research Design that you will be using. Issues to be addressed here include the name of the design (e.g., true experimental design), the use of random assignment, and any special features that you will include in the design (e.g., the type of comparison group you will use for quasi-experimental designs).
- 4a. Check (✓) the statement below that best describes your Research Design. If you find that you need to check more than one statement (e.g., True experimental <u>and</u> Quasi-experimental), you are using more than one Research Design and will need to complete a separate copy of the survey for the other design. Also, check the statements that describe the comparisons you will be making as part of your Research Design.

Res	Research Design (Check One)			
√	True experimental with random assignment to treatment and comparison groups			
	Quasi-experimental with matched contemporaneous groups (treatment and comparison)			
	Quasi-experimental with matched historical group			
	Other (Specify)			
Cor	Comparisons (Check all that apply)			
	Post-Program, Single Assessment			
	Post-Program, Repeated Assessments (e.g., 6 and 12 months after program separation)			
	Pre-Post Assessment with Single Post-Program Assessment			
X	Pre-Post Assessment with Repeated Post-Program Assessments (e.g., 6 and 12 months after program separation) (pre-			
	intervention baselines will be established for all participants (treatment and control) to enable identification of program			
	impact discrete from the impact of the system-wide program)			
	Other (Specify)			

- 4b. If you are using a historical comparison group, describe how you will control for period and cohort effects.
- 5. **Cost/Benefit Analysis**: Indicate by checking "yes" or "no" whether you will be conducting a Program cost/benefit analysis that includes at least: a) the cost per participant of providing the interventions to the treatment and comparison groups; b) the cost savings to your county represented by the effectiveness of the treatment interventions; and, c) your assessment of the program's future (e.g., it will continue as is, be changed significantly, be dropped) given the results of the cost/benefit analysis.

Cost/Benefit Analysis					
1	Yes			No	

5a. If you will perform a cost/benefit analysis, describe how that analysis will be performed.

Response: The difference in costs between the treatment group and the control group will be compared to the difference in benefits between the two groups. Major costs will be those for labor and operating expenses, including imputed costs for any donated services and any costs incurred by participants (e.g., travel costs). The costs of conducting the research and the cost-benefit analysis will not be counted because they would not be part of the permanent program. Benefits will include (1) reduced jail and court costs associated with lower recidivism, (2) reduction in crime, (3) fewer hospitalizations, and (4) increased employment. In order to help policy makers determine the value of maintaining the program into the future, these costs and benefits will be considered along with subjective factors such as the likely improvement in the quality of life of the participants and their families.

6. **Target Population**: This refers to the criteria that treatment and comparison subjects must meet in order to be able to participate in the research. Target criteria might include diagnostic categories, age, gender, risk level, legal history, geographical area of residence, etc. Please provide a detailed description of the criteria you will be using and how you will measure those criteria to determine eligibility.

Response: To participate in this program, an inmate must be diagnosed in the jail with a mental disorder that interferes with community living to the extent that without services the individual would be unable to maintain residence, engage in productive activities and daily responsibilities, maintain a social support system, and/or keep healthy. Typical mental health diagnoses for clients will include major mental disorders such as schizophrenia, bipolar disorder, major depression, and psychotic disorders. Disorders such as sleep disorders, narcissistic personality disorder, and alcohol-related disorders will not qualify an inmate for the program.

Also, to participate in this program, an inmate must plan to reside in Orange County, be expected to remain in the jail for at least two weeks post diagnosis, and not be likely to receive probation when released. To protect the public, inmates with charges or convictions such as child molestation, rape, arson, and attempted murder will be excluded from participation in the program.

6a. Describe any standardized instruments or procedures that will be used to determine eligibility for Program participation, and the eligibility criteria associated with each (e.g., "significant psychopathology" as measured by the MMPI, etc.).

Response: Qualified personnel, including psychiatrists, psychologists, and mental health nurses, will use standard procedures for diagnosing clients. There are no plans to use standardized instruments such as the MMPI.

7. **Sample Size**: This refers to the number of subjects who will participate in the treatment and comparison samples during the entire course of the research. Of course, in any applied research program, subjects drop out for various reasons (e.g., moving out of the county, failure to complete the program). In addition, there will probably be mentally ill offenders who participate in the Program you will be researching and not be part of the research sample (e.g., they may not meet one or more of the criteria for participation in the research), or they may enter into the Program too late for you to conduct the follow-up the research you intend to do. **Using the table below**, indicate the number of participants who will complete the treatment interventions or comparison group interventions, plus the minimum six months follow-up period after Program completion. This also will be the number of subjects that you will be including in your statistical hypothesis testing to evaluate the Program outcomes. Provide a breakdown of the sample sizes for each of the four Program years, as well as the total Program. Under **Unit of Analysis**, check the box that best describes the unit of analysis you will be using in your design.

Sample Sizes (Write the expected number in each group)							
Program Year	Treatment Group	Comparison Group					
First Year	125	125					
Second Year	125	125					
Third Year	125	125					
Fourth Year	63	63					
Total	438	438					
Unit of Analysis	Unit of Analysis (Check one)						
✓ Individual Offender		Family					
Institution		Geographic Area (e.g., neighborhood)					
Other		Other:					

Rebecca—I lowered the subject totals to reflect the fact that the final treatment completion date precedes the final follow-up data date, thereby limiting the number of subjects available for the final year.

8. **Key Dates:**

• "Program Operational" is the date that the first treatment subject will start in the Program.

- "Final Treatment Completion" is the date when the last treatment subject in the research sample will finish the interventions that constitute the Program (and before the start of the follow-up period).
- "Final Follow Up Data" is the date when the last follow-up data will be gathered on a research subject (e.g., six months after the last subject completes the treatment interventions or whenever these data will become available).

Program Operational Date: 11/01/1999 Final Treatment Completion Date: 04/01/2003 Final Follow-Up Data Date: 7/30/2003

9. **Matching Criteria**: (Whether or not you are using a true experimental design), please indicate the variables that you will be tracking to assess comparability between the groups. Matching criteria might include: age, gender, ethnicity, socioeconomic status, criminal history mental health diagnosis, etc.

Response: Variables for tracking comparability are:

Age (measurement: listing of client's age and birth date during psychiatric interview at jail)
Gender (measurement: listing of client's gender during psychiatric interview at jail)
Ethnicity (measurement: listing of client's ethnicity during psychiatric interview at jail)
Education (measurement: listing of client's education during psychiatric interview at jail)
Work history (measurement: listing of client's work history during psychiatric interview at jail)
Annual Income (measurement: listing of client's annual income during psychiatric interview at jail)
Mental Health (measurement: listing of client's diagnosis during psychiatric interview at jail)
Drug Use (measurement: listing of client's drug use during psychiatric interview at jail)
Criminal History (measurement: state data system for tracking arrests and convictions)
Housing Status (measurement: listing of client's housing status during psychiatric interview at jail)
Familial Support (measurement: listing of client's familial support during psychiatric interview at jail)

9a. After each characteristic listed above, describe how it will be measured.

See above.

9b. Which of these characteristics, if unequally distributed between the treatment and comparison groups, would complicate or confound the tests of your hypotheses? How will you manage that problem?

Response: Using the Orange County Correctional Mental Health Data System, we found little correlation between recidivism and age, gender, ethnicity, education, and mental health diagnosis. Consequently, we expect that unequal distribution of these variables between the treatment and control groups would have little impact on differences in recidivism between the two groups. We were unable to examine the possible impact of criminal history, housing status, income, and familial support on recidivism and consequently do not yet have expectations regarding their relationship to recidivism. (Note: Several studies have been published on predictors of recidivism among the general jail population, but their findings may not bear on mentally ill offenders.) The number of subjects in the proposed study is sufficiently large that we expect all of these variables to be evenly distributed among the participants. If a variable is unequally distributed, we will consider matching on that variable. The data analysis will use multivariate procedures to statistically adjust for variance associated with the matching variables. This analysis will indicate whether the treatment program predicts recidivism above and beyond the matching variables. Tests for interactions will be conducted to determine whether program effects are dependent in part on salient patient characteristics. For example, if, say, women receive more benefit from the program, a test for the interaction of gender with program assignment (control versus treatment) would indicate that that is the case.

9c. If you are using an historical comparison group, describe how you will ensure comparability (in terms of target population and matching characteristics) between the groups.

N/A

10. **Comparison Group**: The intent here is to document the kind of comparison group you will using. If you are using a true experimental design, the comparison group will be randomly selected from the same subject pool as the treatment subjects (in which case you would enter "true experimental design" in the space below). However, for quasi-experimental designs, the comparison group might come from a number of different sources such as: matched institutions, matched geographical areas, other matched counties, a matched historical group, etc.

Please identify the source of your comparison group.

Response: We are using a true experimental design—the comparison group will be drawn from the same subject pool as the treatment subjects.

11. **Assessment Process**: The intent here is to summarize the <u>assessment process that will determine the nature of the interventions that the mentally ill offenders in the treatment group will receive</u>. For example, psychological testing, multi-agency and/or multi-disciplinary assessments, etc. Also, describe the qualifications of those who will be doing the assessments.

Response: Qualified personnel, including psychiatrists, psychologists, and mental health nurses, will assess each mentally ill offender assigned to the treatment

group and will determine his/her mental health intervention and, if appropriate, drug treatment intervention.

11a. Describe any standardized assessment instruments that will be administered to all treatment group subjects for the purposes of identifying appropriate interventions.

Response: There is no plan to use such instruments at this time.

11b Describe any assessment instrument designed by your county that you will use.

Response: There is no plan to use such instruments at this time.

11c. Identify which assessment instruments, if any, will also be administered to comparison group subjects.

Response: There is no plan to use such instruments at this time.

12. **Treatment Group Eligibility**: Indicate the process (as opposed to the criteria) by which research subjects will be selected into the pool from which treatment subjects will be chosen. This process might include referral by a judge, referral by a school official, referral by a law enforcement officer, administration of a risk assessment instrument, etc.

Response: All jailed offenders with a major mental disorder will be identified and then followed through sentencing. If an offender is not sentenced to state prison or formal probation, the Health Care Agency staff will contact the evaluation research unit. The research unit will review criteria for the offender and, if the criteria are met, randomly assign him/her to the treatment group or the control group. If the offender is assigned to the treatment group, the Impact staff will develop and execute a service plan for the offender prior to his/her release.

13. **Comparison Group Eligibility**: Indicate the process by which research subjects will be selected into the pool from which comparison subjects will be chosen. For true experimental designs, this process will be the same as for treatment subjects.

Response: Same as in 12.

13a. If procedures for determining the eligibility of participants for the Comparison Group differ from those described in 12, please describe them. If different procedures are used, how will you ensure comparability of the two groups in terms of critical characteristics?

Answer questions 14 - 17 by filling in the table below as instructed.

14. **Outcome Variables**: In the table below, list some of the most important outcome variables that you are hypothesizing will be positively affected by your Program. Possibilities include improvement in personal functioning, arrest rate, successful completion of probation, alcohol and drug—related behavior, risk classification, etc.

- 15. **Score/Scale**: To "measure" the effects produced by your Program requires putting the variable in question on some sort of measuring scale (e.g., a test score, a count of occurrences, a rating scale, a change-score indicating progress of some sort). For each variable, for which you are making a hypothesis, indicate in the table below the measurement that you will be statistically analyzing when you test your hypothesis.
- 16. **Additional Information**: To explain more fully how you intend to test your hypothesis, you might find it helpful to supply additional information. For example, you might intend to partition the data by gender, or make differential hypotheses for different age ranges. Supplying "additional information" is optional; but if there is some aspect of the hypotheses testing that is important for us to know about, please supply the information in this section.
- 16a. For each outcome variable that will <u>not</u> be measured by a standardized assessment procedure, describe the measurement procedures that will be used. For instance, if your county has developed a risk-assessment tool that you will be using to measure change, please describe how it works.
- 17. **Significance Test**: In order for a statistical procedure to be the appropriate test of a particular hypothesis, certain assumptions must be met. It is critical at the outset of a research design to make sure that the measuring devices, measuring scales, samples, and methodology produce the kind of data that fit the requirements of the intended statistical procedure. In this section, please list your choice for the testing of your hypothesis, given the research design you have chosen, the measurement you will use, and the data you will be collecting.

Variable	Score/Scale	Additional Information	Significance Test
Pre-program arrests Post-program-assignment	Number of arrests		ANOVA Logistic or Poisson
arrests for new crimes			Regression/t test
Time until post-program-	Time		Survival Analysis
assignment arrest for new			(a.k.a. event history
crime			analysis)/t test
Severity of crime associated	Ranking of		ANOVA
with pre-program arrests	Severity		Ordinal Logistic
and post-program-assignment			Regression/t test
Pre-program and post-	Number of		ANOVA
program-assignment	occurrences		Logistic or Poisson
psychiatric hospitalization			Regression/t test
Time until post-program-	Time		Survival Analysis
assignment psychiatric			(a.k.a. event history
hospitalization			analysis)/t test

The following questions are supplemental to the Research Design Summary Form and will help us understand how you intend to manage data collected for this project.

18. What additional background information (if any) will be collected for the participants (both treatment and comparison)? For instance, will you gather information about family criminal background, drug involvement, family variables, work history, educational background, etc. If so, what will be collected and how?

Response: Data will be collected on age, gender, ethnicity, education, drug use, work history, annual income, housing status, and familial support. Data collection methods are described in item 9.

19. How will the process evaluation be performed? What components will be addressed and how will they be measured (e.g., services available and frequency of use of those services by each participant)? What is the time frame for gathering process-related information? What recording mechanisms will be used? If descriptive or statistical analyses will be performed, please describe what they will be.

Response: We will assess (1) whether patients are obtaining medications as prescribed by their doctors, (2) whether they are attending mental health counseling sessions as described in their service plans, (3) whether they are attending drug treatment counseling as described in their service plans. Data on obtaining medications will be obtained from the county pharmacy database. Data on mental health counseling and drug treatment will be obtained from the Orange County Health Care Agency Service Delivery Data System. Data on these services will be reviewed for each client on a monthly basis. The process evaluation will also document program implementation activities, challenges, and modifications.

20. Describe how you will document services received by the treatment and comparison group members. Examples are: how many counseling sessions did the subject attend, how intense (and by what measure) was the drug treatment, did the subject complete the interventions, etc.?

Response: Data on mental health counseling and drug treatment for the treatment and comparison group members will be obtained from the Orange County Health Care Agency Service Delivery Data System. This system notes the dates of treatment sessions and the amount of time each session lasts. For additional documentation, treatment clients' counselors will be surveyed.

21. What will be the criteria for completion of the program (by what criteria will you decide that the research subject has received the full measure of the treatment that is hypothesized to have a beneficial impact. For instance, will the Program run for a specified amount of time irrespective of the participants' improvement or lack thereof? If so, how long? Alternatively, will completion be determined by the participants' having achieved a particular outcome? If so, what will that outcome be and how will it be measured? An example is decreased risk as measured by a "level of functioning" instrument.

Response: During the course of IMPACT, some clients will become reasonably functional and will no longer need services. To ensure that IMPACT's resources are used efficiently, such individuals should be identified so their services can be ended. Accordingly, the IMPACT review team will meet to determine whether clients (1) have been safely maintained in the community for one year, (2) no longer require increased treatment services, and (3) have a Global Assessment of Functioning (GAF) Scale of at least 60. Services will be discontinued for individuals meeting these criteria. Individuals who do not meet these criteria will continue to receive services for the duration of IMPACT.

22. If Program completion will be linked to probation terms, how will you record those terms and identify adequate completion? Examples include completion of mental health or substance abuse programs, etc.

Response: Program completion is not linked to probation.

23. On what basis will a subject be terminated from the Program and be deemed to have failed to complete the Program? Will those who leave, drop out, fail, or are terminated from the Program be tracked in terms of the research dependent variables? For how long?

Response: Subjects will not be terminated from the program. A subject who fails to comply with the program will be so noted, but that person will still be considered a treatment subject in the analysis. We plan to "analyze them as we randomized them." To do otherwise would raise questions about the comparability of the groups. Subjects who leave, drop out, or fail will continue to be tracked in terms of the major research dependent variables (i.e. recidivism and hospitalization). Once a subject is placed in a treatment or control group, he/she will be tracked until the end of the program.